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	FO	RM		First Named	Inventor	GORDON	, Glen A.			
		,		Art Unit		3736				
(to be us	sed for all corresp	ondence after initial	filing)	Examiner Na	me	LACYK, Jo	ohn P.			
Total Nun	nber of Pages in	This Submission		Attorney Doc	ket Number	P3245				
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Fee	Transmittal Fo	orm		Drawing(s)	•					munication to TC
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	Affidavits/d	eclaration(s)		Power of Attorney, Revocation Change of Correspondence Address  Status Letter						
Extension of Time Request			Terminal Disclaimer  Other Enclosure(s) (please below):			lease Identify				
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Firm Name	TODD N	N. HATHAWAY, A	TTORNE	Y AT LAW						
Signature		1/1/1			1					<del>-</del> .
Printed name TODD N. HATHAWAY										
Date	20	3HU(10)	J			Reg. No.	32,991		<del>.</del>	
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Signature		Kath	lun	as	ato					
Typed or pri	inted name	KATHLEEN A. T	ATE		_			Date	8/23	105 /

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/17 (12-04v2)

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Fees pursuant to the	Effective on Consolinated	1208j2004.	t, 2005 (H.R. 4818).
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For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 225.00

Complete if Known				
Application Number	10/749,324			
Filing Date	12/31/2003			
First Named Inventor	GORDON, Glen A.			
Examiner Name	LACYK, John P.			
Art Unit	3736			
Attorney Docket No.	P3245			

METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify):  Deposit Account Deposit Account Number: 08-1254  Deposit Account Name: Todd N. Hathaway							
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FEE CALCULATION			17.11				
1. BASIC FILING, SEA	RCH, AND	EXAMINATION	FEES				
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Application Type	<u>Fee (\$)</u>	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	imall Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	*****
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES Small Entity							
Fee Description Fee (\$) Fee (\$)							
Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100							100
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Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent							
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Indep. Claims							
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 shoets of paper (evaluating alcohomically filed exceeding).							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50							
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof - 100 = /50 = (round up to a whole number) x = Fee (\$)							
A OTHER EEE/S)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 2 Month Extension Fee 225.00							

SUBMITTED BY			
Signature	Winds	Registration No. (Attorney/Agent) 32,991	Telephone 360-647-1976
Name (Print/Type)	(Feel) 1/1A	7/	Date 23 AUG 05

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